

DUE DATE:

Please Read Instructions:

## TRANSCRIPT ORDER

1. NAME Kendra Morries			2. PHONE NUMBER (213) 430-7801	3. DATE 8/20/2015
4. MAILING ADDRESS O'melveny & Myers, 400 South Hope Street			5. CITY Los Angeles	6. STATE CA
7. ZIP CODE 90071				
8. CASE NUMBER 1:14-cv-00254		9. JUDGE Hon. Andrew S. Hanen	DATES OF PROCEEDINGS 10. FROM 8/19/2015 11. TO 8/19/2015	
12. CASE NAME State of Texas v. United States of America			LOCATION OF PROCEEDINGS 13. CITY Brownsville 14. STATE Texas	
15. ORDER FOR <input type="checkbox"/> APPEAL <input type="checkbox"/> CRIMINAL <input type="checkbox"/> CRIMINAL JUSTICE ACT <input type="checkbox"/> BANKRUPTCY <input checked="" type="checkbox"/> NON-APPEAL <input checked="" type="checkbox"/> CIVIL <input type="checkbox"/> IN FORMA PAUPERIS <input type="checkbox"/> OTHER				
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)				
PORTIONS		DATE(S)	PORTION(S)	DATE(S)
<input type="checkbox"/> VOIR DIRE			<input type="checkbox"/> TESTIMONY (Specify Witness)	United States District Court Southern District of Texas FILED
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)				
<input type="checkbox"/> OPENING STATEMENT (Defendant)				
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)			<input type="checkbox"/> PRE-TRIAL PROCEEDING (Spcy)	AUG 24 2015
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)				
<input type="checkbox"/> OPINION OF COURT				David J. Bradley, Clerk of Court
<input type="checkbox"/> JURY INSTRUCTIONS			<input checked="" type="checkbox"/> OTHER (Specify)	
<input type="checkbox"/> SENTENCING			8/19/2015 Hearing-complete	
<input type="checkbox"/> BAIL HEARING			transcript	
17. ORDER				
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE
ORDINARY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES	
14-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES	
EXPEDITED	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES	
DAILY	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NO. OF COPIES 1	
HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES	
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>		
CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional).			ESTIMATE TOTAL	0.00
18. SIGNATURE <i>Kendra Morries</i>			PROCESSED BY	
19. DATE 8/20/2015			PHONE NUMBER	
TRANSCRIPT TO BE PREPARED BY			COURT ADDRESS	
ORDER RECEIVED	DATE	BY		
DEPOSIT PAID			DEPOSIT PAID	
TRANSCRIPT ORDERED			TOTAL CHARGES	0.00
TRANSCRIPT RECEIVED			LESS DEPOSIT	0.00
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT			TOTAL REFUNDED	
PARTY RECEIVED TRANSCRIPT			TOTAL DUE	0.00

DISTRIBUTION:

COURT COPY

TRANSCRIPTION COPY

ORDER RECEIPT

ORDER COPY